Approved for use through 103 2007. Olds 005 co. 001

U.S. Plette and Tradsmark Office, U.S. DEPARABELT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information under a fleighty a valid CMB counter number.

PETITION	FOR EXTENSION OF TIME UNDER	Docket Number (Optional)		
FY 2007			P18116-US1	
(Fees pursuent to the Consolideted Appropriations Act, 2005 (H.R. 4818).)			turne 24 200	
Application Number 10/602,167			Filed June 24, 2003	
For Message Authentication				
Art Unit 2435			Examiner Thanhnga B Truong	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
abla	One month (37 CFR 1.17(a)(1))	\$120	\$60	s130.00
	Two months (37 CFR 1.17(a)(2))	\$460	\$230	s
	Three months (37 CFR 1.17(a)(3))	\$1050	\$525	s
	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	s
	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	s
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1379 . I have enclosed a duplicate copy of this sheet.				
WARNING: Information on this form may become public. Credit card information should not be included on this form.				
Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 50,298				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
11/1			April 23, 2009	
Signature Date				
Michael Cameron			972-583-4145	
Typed or printed name			Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
Total of forms are submitted.				
his collection of	information is required by 37 CFR 1.136(a). The information	mation is required to obtain o	retain a benefit by the public w	hich is to file (and by the

This collection of Information is required by 3 C FR 1.136(a). The information is required to obtain or retain a benefit by the public which is to title (and by the USFYTO process) and application. Confidentially is governed by \$3 U.S. C. 12 and 3 C FR 1.11 and 1.1. This collection is estimated to take of minutes to complete, including gathering, propering, and supermitting the completed application from to the USFYTO. Time will vary depending upon the individual case. Any comments on the amount off prinsporting, and supermitting the completed the first married to gathering the supermitted to the Clief Information Officer, comments on the amount off prinsport to complete the first married to gathering with the complete the supermitted to the Clief Information Officer, U.S. Petern that officer is a complete the supermitted of Commence, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO. Commissioner for Partners, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO. Commissioner for Partners, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO. Commissioner for Partners, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO. Commissioner for the Clief Partners, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO. Commissioner for Partners, P.O. Son 1460, Absandrix, V.A. 22315-1450, D. NOT SEND FEES OR COMPLETED FORMAT TO THIS ADDRESS. SEND TO THE PARTNERS TO THE PARTNERS TO THIS ADDRESS. SEND TO THE PARTNERS TO THIS ADDRESS. SEND TO THE PARTNERS TO THE PAR